

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. <b>NY-WELLA 204-US</b>	
		First Inventor <b>Karl-Heinz Pitsch</b>	
		Title <b>CLIENT RELATIONSHIP MANAGEMENT AND PRODUCT DISTRIBUTION SYSTEM AND METHOD</b>	
		Express Mail Label No. <b>EV 331557769 US</b>	

<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>	<b>ADDRESS TO:</b> MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
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<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small></p> <p>2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small></p> <p>3. <input checked="" type="checkbox"/> Specification <span style="float: right;">[Total Pages <b>20</b>]</span> <small>(preferred arrangement set forth below)</small><ul style="list-style-type: none"><li>- Descriptive title of the invention</li><li>- Cross Reference to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to sequence listing, a table, or a computer program listing appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul></p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <span style="float: right;">[Total Sheets <b>7</b>]</span></p> <p>5. Oath or Declaration <span style="float: right;">[Total Sheets <b>      </b>]</span><ul style="list-style-type: none"><li>a. <input type="checkbox"/> Newly executed (original or copy)</li><li>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small><ul style="list-style-type: none"><li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></li></ul></li></ul></p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>	<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <small>(Appendix)</small></p> <p>8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small><ul style="list-style-type: none"><li>a. <input type="checkbox"/> Computer Readable Form (CRF)</li><li>b. Specification Sequence Listing on:<ul style="list-style-type: none"><li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</li><li>ii. <input type="checkbox"/> Paper</li></ul></li><li>c. <input type="checkbox"/> Statements verifying identity of above copies</li></ul></p> <p style="text-align: center;"><b>ACCOMPANYING APPLICATIONS PARTS</b></p> <p>9. <input type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <span style="float: right;"><input type="checkbox"/> Power of Attorney</span> <small>(when there is an assignee)</small></p> <p>11. <input type="checkbox"/> English Translation Document <small>(if applicable)</small></p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <span style="float: right;"><input type="checkbox"/> Copies of IDS Citations</span></p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small></p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). <small>Applicant must attach form PTO/SB/35 or its equivalent.</small></p> <p>17. <input checked="" type="checkbox"/> Other:<ul style="list-style-type: none"><li>- Unexecuted Declaration/Power of Attorney Form</li><li>- Check for Filing Fee</li></ul></p>
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18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☒ Continuation-in-part (CIP) of prior application No.: **60/406,371 filed 8/26/2002**

Prior application information: Examiner **Not Yet Assigned** Art Unit: **N/A**

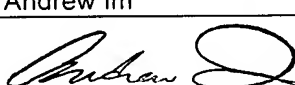
**For CONTINUATION or DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

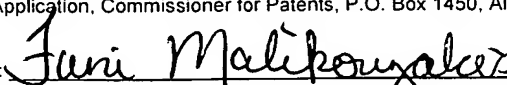
**19. CORRESPONDENCE ADDRESS**

<input checked="" type="checkbox"/> Customer Number: <b>024972</b>		OR <input type="checkbox"/> Correspondence address below	
Name <b>C. Andrew Im</b>			
Address <b></b>			
City <b></b>	State <b></b>	Zip Code <b></b>	
Country <b></b>	Telephone <b></b>	Fax <b></b>	

Name (Print/Type) <b>C. Andrew Im</b>	Registration No. (Attorney/Agent) <b>40,657</b>
Signature 	Date <b>8/26/03</b>

<b>Utility Patent Application Transmittal</b>	
I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 331557769 US, in an envelope addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: <b>Aug. 26, 2003</b>	Signature:  (Fani Malikouzakis)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2003</h3> <p style="font-size: small; margin: 0;">Effective 01/01/2003, Patent fees are subject to annual revision.</p>		<b>Complete if Known</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	
		Filing Date	
		First Named Inventor	
		Examiner Name	
		Art Unit	
TOTAL AMOUNT OF PAYMENT (\$)		1,728.00	
Attorney Docket No.		NY-WELLA 204-US	

<b>METHOD OF PAYMENT (check all that apply)</b> <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input type="checkbox"/> Deposit Account Deposit Account Number: <span style="border: 1px solid black; padding: 2px;">50-0624</span> Deposit Account Name: <span style="border: 1px solid black; padding: 2px;">Fulbright &amp; Jaworski L.L.P.</span> The Director is hereby authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.				<b>FEE CALCULATION (continued)</b>																																																																																																																																																																																																																																															
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BASIC FILING FEE</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1001</td> <td>750</td> <td>2001</td> <td>375</td> <td>Utility filing fee</td> <td>750.00</td> </tr> <tr> <td>1002</td> <td>330</td> <td>2002</td> <td>165</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>1003</td> <td>520</td> <td>2003</td> <td>260</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>1004</td> <td>750</td> <td>2004</td> <td>375</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>1005</td> <td>160</td> <td>2005</td> <td>80</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (1)</b></td> <td><b>750.00</b></td> </tr> </tbody> </table>				Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1001	750	2001	375	Utility filing fee	750.00	1002	330	2002	165	Design filing fee		1003	520	2003	260	Plant filing fee		1004	750	2004	375	Reissue filing fee		1005	160	2005	80	Provisional filing fee		<b>SUBTOTAL (1)</b>					<b>750.00</b>	<b>3. 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<b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2"></th> <th colspan="2">Extra Claims</th> <th colspan="2">Fee from below</th> <th colspan="2">Fee Paid</th> </tr> <tr> <th>Total Claims</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>51</td> <td>-20** =</td> <td>31</td> <td>x</td> <td>18.00</td> <td>=</td> <td>558.00</td> <td></td> </tr> <tr> <td>8</td> <td>-3** =</td> <td>5</td> <td>x</td> <td>84.00</td> <td>=</td> <td>420.00</td> <td></td> </tr> <tr> <td colspan="8">Multiple Dependent</td> </tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1202</td> <td>18</td> <td>2202</td> <td>9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>1201</td> <td>84</td> <td>2201</td> <td>42</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>1203</td> <td>280</td> <td>2203</td> <td>140</td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>1204</td> <td>84</td> <td>2204</td> <td>42</td> <td>** Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>1205</td> <td>18</td> <td>2205</td> <td>9</td> <td>** Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (2)</b></td> <td><b>978.00</b></td> </tr> </tbody> </table> <p style="font-size: x-small;">**or number previously paid, if greater; For Reissues, see above</p>						Extra Claims		Fee from below		Fee Paid		Total Claims								51	-20** =	31	x	18.00	=	558.00		8	-3** =	5	x	84.00	=	420.00		Multiple Dependent								Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1202	18	2202	9	Claims in excess of 20		1201	84	2201	42	Independent claims in excess of 3		1203	280	2203	140	Multiple dependent claim, if not paid		1204	84	2204	42	** Reissue independent claims over original patent		1205	18	2205	9	** Reissue claims in excess of 20 and over original patent		<b>SUBTOTAL (2)</b>					<b>978.00</b>																																																																																																																																																										
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<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>	
Name (Print/Type)	C. Andrew Im	Registration No. (Attorney/Agent)	40,657
Signature		Telephone	(212) 318-3359
		Date	8/26/03

<b>Fee Transmittal</b> I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 331557769 US, in an envelope addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below. Dated: <u>Aug. 26, 2003</u> Signature: <u>Fani Malikouzakakis</u> (Fani Malikouzakakis)	
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